



Commonwealth
of Massachusetts

Center for Health
Information and Analysis

All Payer Claims Database Data Volume Reports

2008 - 2012

March 2013

The Commonwealth of Massachusetts established an All Payer Claims Database (APCD) in 2010 as one of the largest data collection efforts undertaken by the state. Regulation 114.5 CMR 21.00, Health Care Payer Claims Data Submissions, requires health insurance payers to submit medical, pharmacy, and dental claims, as well as information about member eligibility, benefit design, and providers to the Center for Health Information and Analysis (CHIA) for Massachusetts residents. The goals of the APCD are to provide administrative simplification to payers and to provide access to timely, accurate, and relevant data for improving quality, mitigating costs, and promoting transparency in the health care delivery system.

The charts below depict the number of records submitted to the Center as of December 2012 by health insurance payers. These Data Volume Reports are a concise way of presenting the amount of APCD data collected by year and file type.

Please feel free to submit any questions related to the reports to the Center's APCD mailbox: CHIA-APCD@state.ma.us.

Thank you for your interest in the All Payer Claims Database.

Commonwealth of Massachusetts-Center for Health Information and Analysis (CHIA)
APCD Data Volume Reports 2008-2012 (based on data received by 12/19/2012)

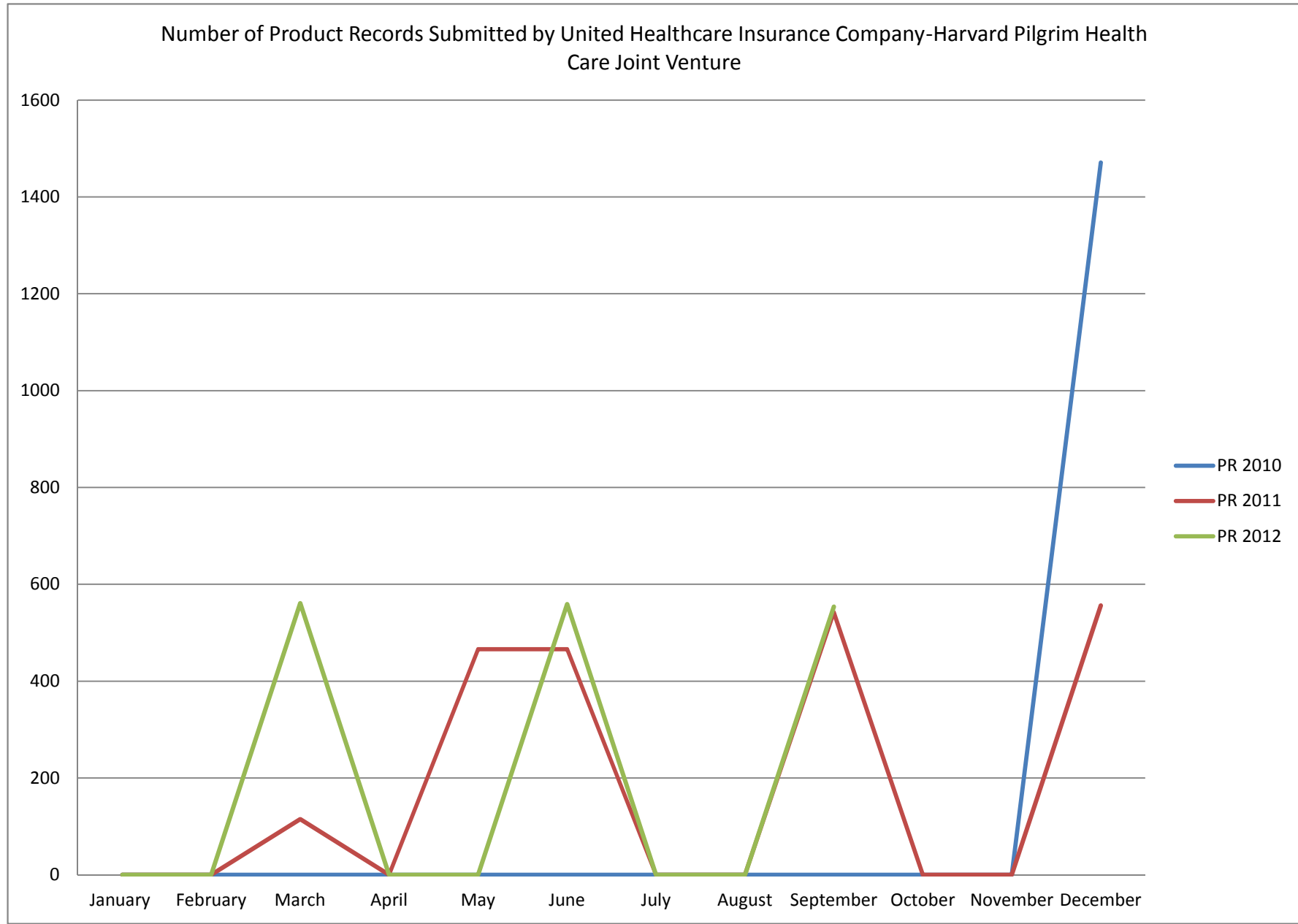
United Healthcare Insurance Company - Harvard Pilgrim Health Care Joint Venture														
File Type*	Submission Year	January	February	March	April	May	June	July	August	September	October	November	December	Total
PR	2010	0	0	0	0	0	0	0	0	0	0	0	1,471	1471
PR	2011	0	0	115	0	466	466	0	0	542	0	0	556	2145
PR	2012	0	0	561	0	0	559	0	0	554				1674
ME	2009	0	0	0	0	0	0	0	0	0	0	0	54,025	54025
ME	2010	0	0	0	0	0	0	0	0	0	0	0	74,983	74983
ME	2011	98,649	85,624	73,303	72,368	354,061	259,711	243,473	228,060	245,394	231,251	232,219	232,905	2,357,018
ME	2012	244,941	244,498	259,964	245,748	245,608	245,989	248,229	248,692	249,349	249,430			2,482,448
PV	2011	73,295	85,154	13,640	16,074	16,215	16,277	16,439	16,245	16,792	17,006	16,052	93,334	396,523
PV	2012	72,409	87,702	73,133	89,814	76,044	77,344	68,128	69,735	69,971	91,048			775,328
MC	2008	113,880	131,603	145,416	148,027	133,174	151,033	152,570	149,115	122,838	158,514	142,458	152,088	1,700,716
MC	2009	163,549	139,990	150,597	151,402	147,113	157,579	150,659	138,353	150,096	154,728	146,812	164,778	1,815,656
MC	2010	138,896	139,548	169,347	178,047	147,954	149,477	151,213	167,566	148,531	156,942	20,695	24,796	1,593,012
MC	2011	18,530	169,405	151,115	168,995	174,576	163,925	152,403	169,045	169,853	185,978	182,284	175,435	1,881,544
MC	2012	165,446	186,473	202,331	181,667	195,442	189,808	176,872	184,545	183,093	205,963			1,871,640
PC	2008	14,641	14,019	14,701	14,232	15,395	14,975	15,503	15,080	15,432	16,311	15,461	16,702	182,452
PC	2009	18,988	17,921	19,920	19,416	19,751	19,923	19,274	19,079	19,666	20,607	20,531	21,454	236,530
PC	2010	24,383	21,984	25,354	24,239	23,788	24,098	23,568	23,643	23,673	24,026	2,084	2,284	243,124
PC	2011	2,198	1,992	2,322	25,201	23,134	27,140	35,893	37,813	19,049	34,719	32,631	31,208	273,300
PC	2012	26,360	38,743	39,967	35,003	40,376	38,454	38,101	38,736	37,125	40,064			372,929
DC	2008	246	192	277	281	286	279	302	394	287	239	229	256	3268
DC	2009	276	271	264	263	296	330	341	420	297	243	225	234	3460
DC	2010	261	259	247	289	220	242	301	244	255	234	17	27	2596
DC	2011	42	321	189	248	253	254	281	366	372	231	0	0	2557
DC	2012	0	0	0	0	0	0	0	0	0	0			0

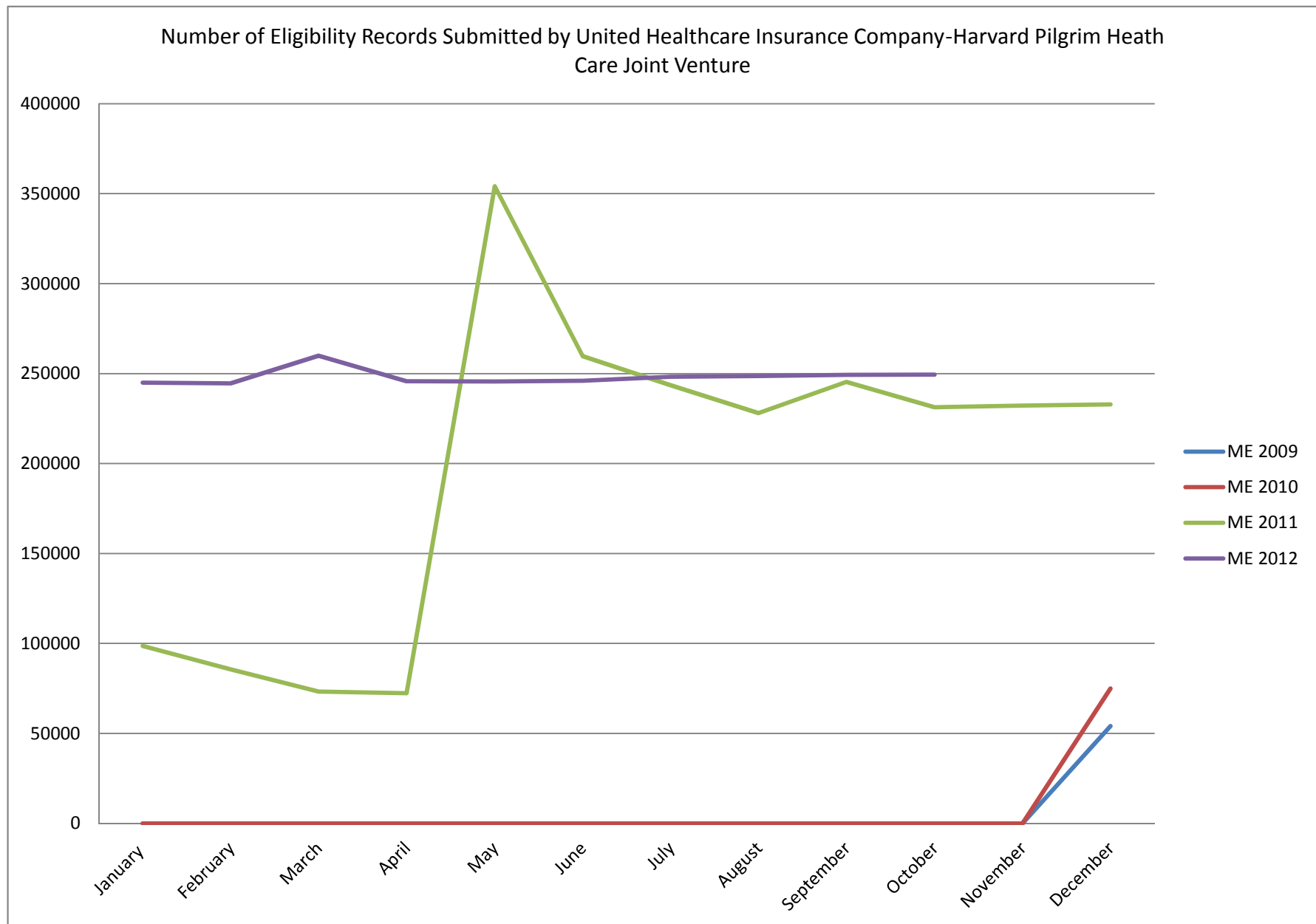
***Key:** PR=Product Records; ME=Member Eligibility Records; PV=Provider Records; MC=Medical Claim Lines; PC=Pharmacy Claim Lines; and DC=Dental Claim Lines.

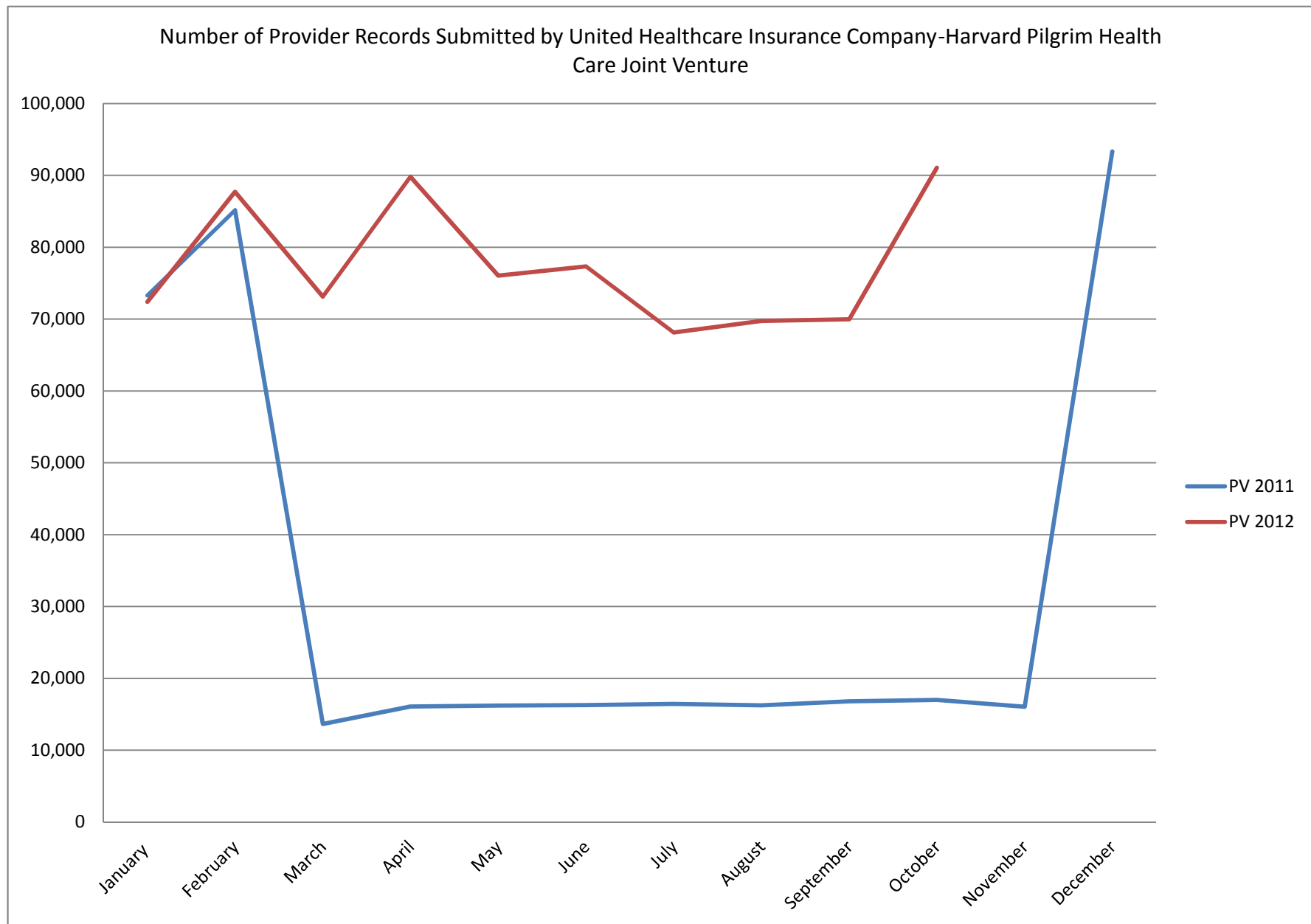
The Volume Report presents the APCD inventory as of December 2012 and reflects the related compliance requirements:

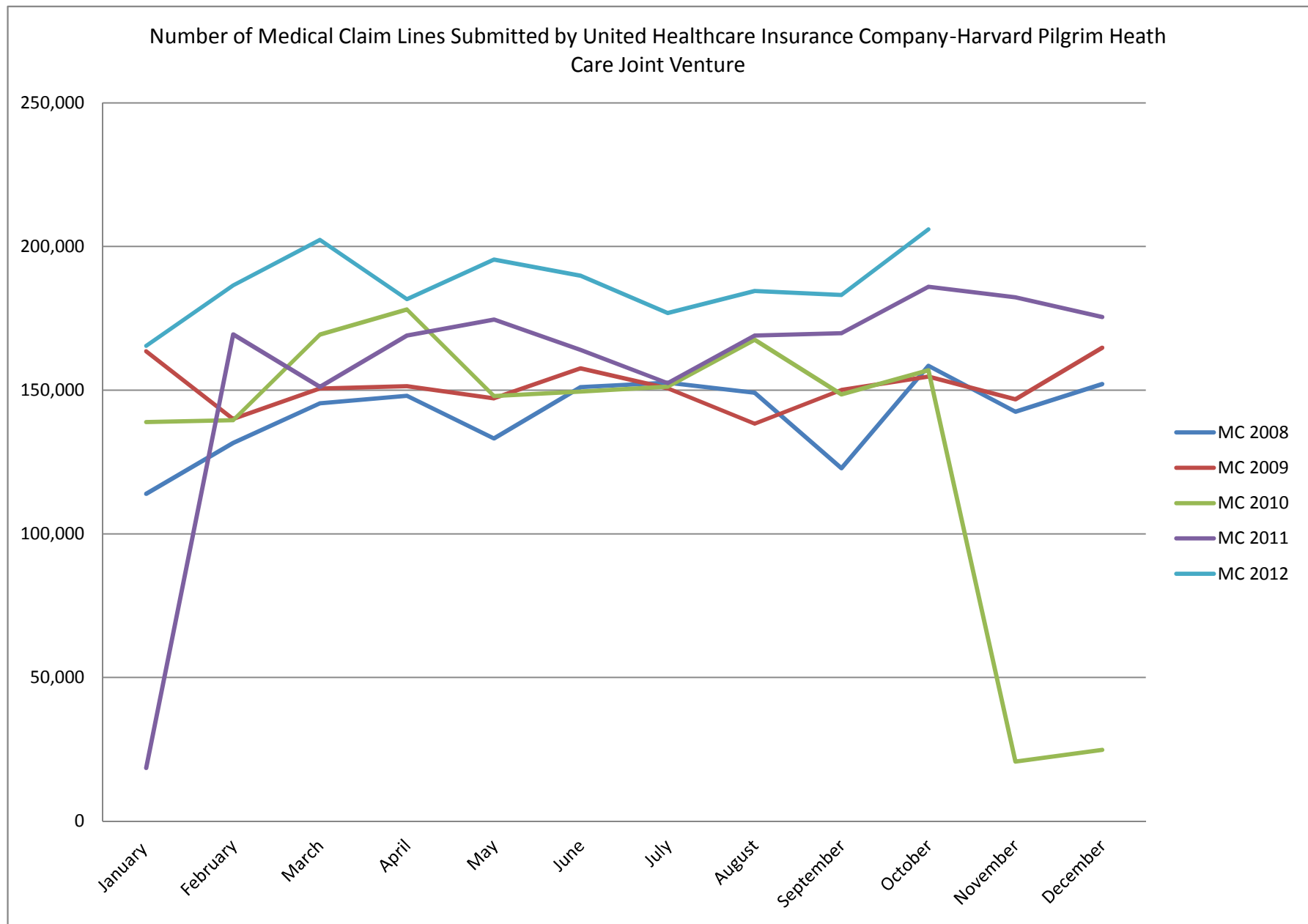
- Medical, pharmacy, and dental submissions are required monthly beginning January 2008.
- Provider submissions are required monthly beginning January 2011. The May 2011 submission contains historical records from 2008 through May 2011.
- Product submissions are required quarterly beginning December 2010. The May 2011 submission contains historical records from 2008 through 2010 plus 2011, quarter one.
- Member eligibility submissions are required monthly beginning in January 2011. Prior to 2011, payers were required to submit two eligibility files: a December 2009 eligibility submission covering calendar years 2008 and 2009, and a December 2010 eligibility submission covering calendar years 2009 and 2010. Eligibility files contain data for twenty-four months of member eligibility.
- The APCD liaisons monitor and enforce compliance rules and authorize exceptions. Some carriers have incomplete data due to: exemptions from filing, limited claim or member base, phasing into APCD and are currently in testing or ramping up their production data filings, are in the process of updating specific submissions, and /or non-compliance.

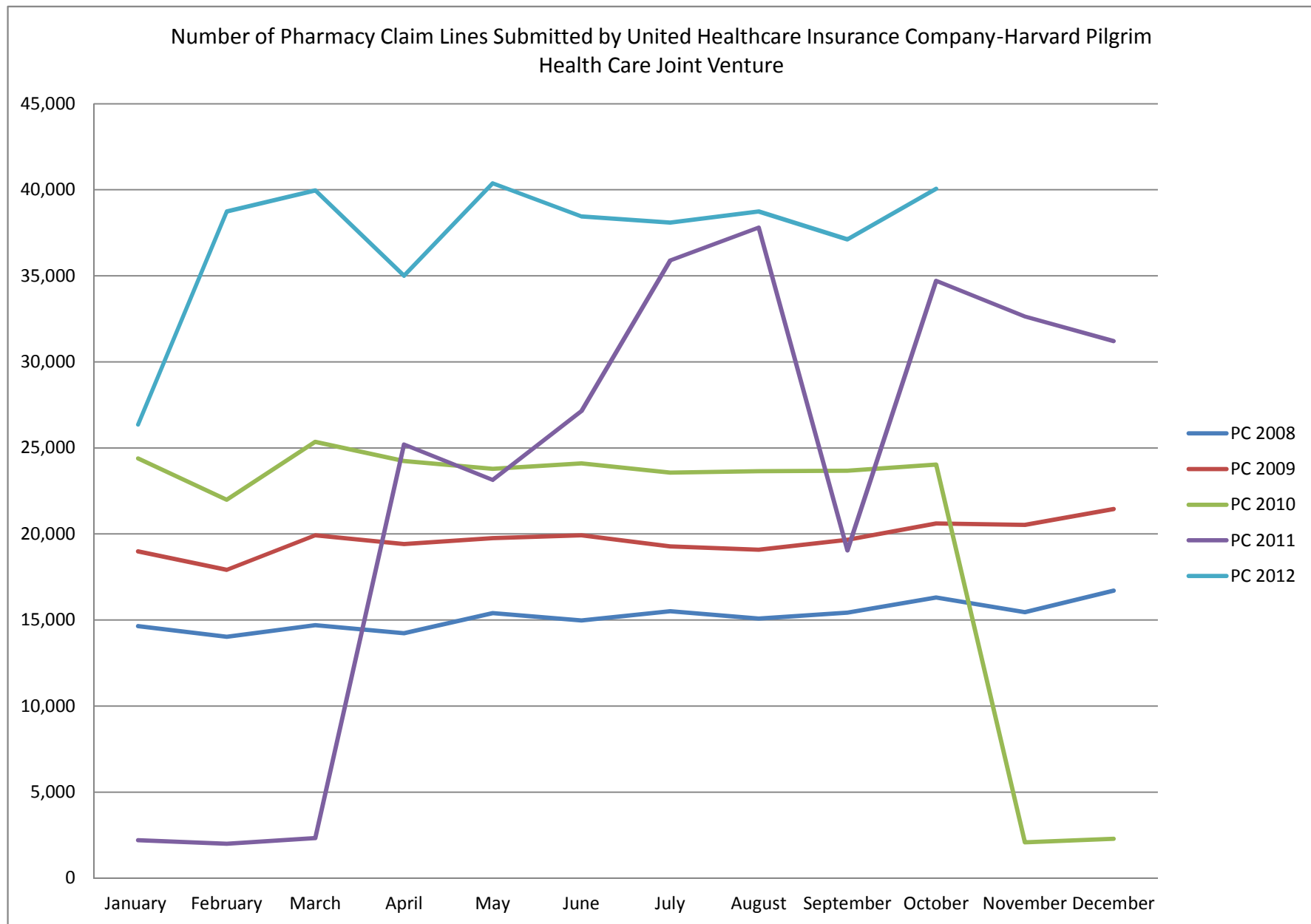
These numbers represent the number of records submitted, not actual counts of members, providers, products or claims.











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